

FORMS FOR BID

FOR CONSTRUCTION ON STATE HIGHWAY IN EL DORADO COUNTY NEAR SOUTH LAKE TAHOE FROM CASCADE ROAD TO UPPER EMERALD BAY ROAD In District 03 On Route 89

Under

Notice to Bidders and Special Provisions dated May 11, 2015

Standard Specifications dated 2010

Project plans approved June 16, 2014

Standard Plans dated 2010

To be submitted conjointly with
Electronic *Bid* book dated May 11, 2015
Identified by
Contract No. 03-1A8434
03-ED-89-13.8/18
Project ID 0300000224

Federal-Aid Project ACSTP-P089(112)

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION

DBE - COMMITMENT

DES-OE-0102.10D (REV 12/2014)

ADA Notice

CONTRACT NO:						
BID AMOUNT:						
BID OPENING DATE:						
BIDDER'S NAME:						
DBE GOAL FROM CONTRA	ACT %:					
DBE PRIME CONTRACTOR	R CERTIFICATION ¹ :	TOTAL NUMBER OF AL	L SUBCONTRACTS (DBE &	NON-DBE)	TOTAL VALUE OF ALL SUBCONTRA	CTS (DBE & NON-DBE)
BID ITEM NO.	SERVICES TO BE S	D DESCRIPTION OF JBCONTRACTED OR BE PROVIDED ²	WORK CATEGORY CODES ³	opened.	NAME OF DBEs st be certified on the date bids are Include Caltrans' certification no., DBE s, and phone number. Show 2nd and lower tier subcontractors)	AMOUNT (\$)
Show all DBE firms being each DBE shown stating shown for the specific an	that it will be participati				Total Claimed Participation	<u>\$</u>
The names of the 1st tier Subcontractor List (Pub 0			be consistent with the			%
¹ Each DBE prime contract performed by DBEs, inclu	ctor must enter its certif	ication number and sh	ow all work to be		er acknowledges that it is comm own on this form to meet the cor	
² If 100% of an item is not the item to be performed		nished by the DBE, des	scribe the exact portion of			
³ Use Work Category Cod	des from the California (Unified Certification Pro	ogram database.	Sig	gnature of Bidder	
				Da	te (A	rea Code) Tel. No.
				Pe	rson to Contact (Ple	ase Type or Print)

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DBE CONFIRMATION

DES-OE-0102.13 (NEW 3/2015)

Comractino.			
Name of DBE business			
Name of DBE representative			
DBE certification number			
Name of hidder			
value of Citaties			
Name of prime contractor if different	from the bidder		
Name of representative of bidder or p	orime contractor		
Date quote was provided to the brode	er or prime contractor		
Bid item number	ltem of work and description of services to be subconfracted or	materials L) be provided ¹	Amount (\$)
			,,,
		1	
If 100% of an item is not to be	e performed or furnished by the DBE, describe the exact portion of the	Total	
item to be performed or furni	snea.	As an authorized representative of a cer enterprise, I confirm that my business with prime contractor shown above regarding bidder is awarded the contract, my busin agreement with the bidder or prime controllar amount of work shown on the DBE I certify under penalty of perjury that the	as contacted by the bidder or the contract shown above. If the less will enter into a contractual ractor to perform the type and E Commitment form.
		Signature of DDC's authorized representativ	9
		Prited name of DEE's authorized represent	ative
		Title of DBE's authorized representative	
		Este	

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STATE OF	CALIFORNIA	 DEDARTMENT 	OF TRANSPORTATION

DBE GOOD	FAITH	FFFORTS	DOCUMEN:	TATION
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DES-OE-0102.11A (REV 12/2014)

Bidder's Name:	
Contract No.: _	

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List items of work the Bidder made available to DBE firms. Identify items of work the Bidder might otherwise perform with its own forces, items that have been broken down into economically feasible units to facilitate DBE participation, and items for which the Bidder has established flexible time frames for performance and delivery schedules in a manner that encourages and facilitates DBE participation. For each item listed, show the dollar value and percentage of the total contract. The Bidder must demonstrate that sufficient work to meet the goal was made available to DBE firms.

Item of Work Offered, Services Offered, or Materials Supplied	Perfori	Normally ms Item s/No	Facilitate I	en Down to Participation s/No	for Performan Scho	xible Timeframes ce and Delivery edules s/No	Amount (\$)	Percentage of Total Bid
	YES	Пио	YES	Пио	YES	□ NO		
	YES	□ NO	YES	□ NO	YES	□ NO		
	YES	Пио	YES	Пио	YES	NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	NO		
	YES	□ NO	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	□NO	YES	□ NO	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	Пио	YES	NO	YES	NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	NO	YES	Пио	YES	NO		
	YES	□ио	YES	Пио	YES	□ NO		
	YES	NO	YES	Пио	YES	□ NO		

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Bidder's Name	<u> </u>
Contract No.: _	

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						clude the items of work offered a copies of solicitations. e-mail me		
Name of DBE Solicited		Date of In	itial Solicitation		Items of	Wark Offered	Follow Up Me	ethods and Dates
	vided quotes, the	price quote for e	ach firm, and the pr	ce difference for	each DBE	pecific to the items of work being if the selected firm is not a DBE ct.		
Items of Work	Specifications t	ed Plans/ for Work Offered s/No	Name of Select	ed DB Non-	E or DBE	Name of Rejected Firm	Quote (\$)	Price Difference (\$)
	YES	□ NO						
	YES	□ NO						
	YES	ОИ						
	YES	Ои						
	YES	Пио						
	YES	Ои						
	YES	Пио						
	YES	□NO						
	YES	□NO						
If the firm selected for the Provide evidence as to v						d attach names, addresses, and	phone numbers for the	firms listed above.

DRE GOOD FAITH EFFORTS DOCUMENTATION				
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TATE OF CALIFORNIA DEPARTMENT OF TRANSPORTATION	
BE GOOD FAITH EFFORTS DOCUMENTATION	Contract No.:
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Bidder's Name:

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Describe the Bidder's outreach efforts to id documents.	entify and solicit the interest of all certified DBE	s that have the capability to perform the work o	fthe Contract. Provide copies of supporting
Description of Outreach	Location (if applicable)	Results	
	de interested DBEs with adequate information as assisted, the type of information provided, and		
equipment the DBE purchases or leases from documents. List efforts made to assist interes	at interested DBEs in obtaining necessary equip in the prime contractor or its affiliate, Identify the ited DBEs in obtaining bonding, lines of credit, i ubcontractor purchases or leases from the prim	DBEs assisted, the type of assistance offered, nsurance, necessary equipment, supplies, mat	and the dates. Provide copies of supporting erials, or related assistance or services,
3. List the names of agencies and the dates o	on which they were contacted to provide assista	nce in contacting, recruiting, and using DBE fir	ms. If the agencies were contacted in writing
provide copies of supporting documents.		J	
3. Include additional data to support a demon	stration of good faith efforts.		
NOTE: USE ADDITIONAL SHEETS OF PAP	ER IF NECESSARY.		

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